



CITY OF DOWNEY

CAT SPAY AND NEUTER REBATE PROGRAM APPLICATION

The City of Downey’s Cat Spay and Neuter program offers up to \$150 to go towards the spay and neuter of a cat with a limit of two cats per eligible household. Interested residents must first complete an application to determine eligibility. The rebate program is offered on a first-come, first-serve basis to residents. Rebates are available until program funding is expended.

ELIGIBILITY CRITERIA:

- Applicant must be a resident of Downey
- Household cat must reside at the address provided by the applicant
- Spay or Neuter procedure must be performed **within the 60 days of application date**
- Procedure must be performed at a licensed Animal Hospital or Veterinarian Clinic
- Applicant must provide an invoice or receipt from the facility where the Spay or Neuter procedure was performed
- Each approved applicant is eligible to receive up to \$150 to assist with spay or neuter procedure costs. No additional costs will be covered by this program.
- Rebates will be limited to **two** Spay or Neuter procedure per **household**.

Applications may be submitted during normal operating business hours Monday through Friday from 7:30 a.m. – 5:30 p.m. Applications are also accepted by mail. Please mail or drop-off applications to: Downey City Hall – City Manager’s Office, 11111 Brookshire Ave, Downey, CA 90241, or emailed to citymanager@downeyca.org.

Please make sure the following documentation is submitted with your application:

- ___ **Copy of current ID/Driver’s License for proof of Downey residency**
- ___ **Copy of itemized vet invoice showing procedure completed**

PLEASE FILL OUT A SEPARATE APPLICATION FOR EACH PET YOU ARE APPLYING FOR.

GENERAL INFORMATION:

First Name: _____ Last Name: _____

Address: _____

Resident Phone Number: _____

Email: _____

SPAY/NEUTER PET INFORMATION:

| Pet Name | Date of Surgery | Name of Animal Hospital/Veterinarian Clinic | Veterinarian's Phone Number | Cost of Procedure |
|----------|-----------------|---|-----------------------------|-------------------|
| | | | | |

APPLICANT AFFIRMATION:

I _____ certify that I am the pet owner and resident of Downey, and that the above surgical procedure was completed on the pet listed above, and that all the information provided on this application is accurate. I have read and fully understand the eligibility guidelines and have included all the necessary information and documentation required to process this rebate. I understand my application approval is contingent on review.

Signature: _____ Date: _____

| DOWNEY STAFF ONLY: | |
|---------------------------|-------------------------------|
| Date Received: | Received by: |
| Date Processed: | Processed by: |
| Approved: YES/NO | Total Eligible Rebate Amount: |